What Is a Home Visit?

*For programs working with expectant families, a home visit:*

🌟 is a face-to-face interaction between the home visitor and a family or parent.

🌟 is scheduled in advance—not a chance meeting.

🌟 is planned for a certain period of time—usually 60-90 minutes.

🌟 usually takes place in the family’s home but may take place at a mutually convenient place such as work place, library, or neighborhood site.

🌟 offers social support and discussion of topics that are important to families.

🌟 involves planned activities and topics based both on the family’s needs and the goals of the program.

🌟 requires planning before the visit and follow-up after the visit.

What Is the Goal of Home Visits During Pregnancy?

The primary goal of prenatal home visiting programs is to help ensure a healthy pregnancy and a healthy baby. This may be achieved by inspiring women to embrace a healthy lifestyle and eat nutritiously, by encouraging regular attendance at prenatal appointments and compliance with their health care provider’s instructions, by reducing stress and overcoming challenges in their lives, by identifying any problems early in the pregnancy, and by supporting expectant families to prepare for the joys and responsibilities of parenthood. The content of your visits should be guided by the stated goals of your particular program and your families’ specific needs.
What Is My Role as a Home Visitor with Expectant Families?

Home visitors offer expectant families support and information to assist them in achieving healthy birth outcomes and in forming an early attachment with their unborn baby through a multitude of roles including:

- **Advocate**: bridging cultural or other barriers to good prenatal care/services; advising mother-to-be about prenatal appointments and other community services
- **Coach**: actively listening to what families need and want, and supporting their efforts to obtain it; encouraging families throughout the pregnancy, labor, and delivery
- **Collaborator**: working with the numerous support and resource services available to secure appropriate services for expectant families
- **Consultant**: helping families find answers to their questions about their pregnancy, relationships, and parenting
- **Facilitator**: empowering families to acquire what they need to accomplish their goals and dreams; helping them follow through on their health care providers’ advice and instructions
- **Mediator**: helping families find solutions and work through problems
- **Mobilizer**: observing evidence of unhealthy behaviors or danger signs during the pregnancy and motivating families to take appropriate action
- **Model**: demonstrating positive lifestyle and parenting behaviors
- **Motivator**: motivating families to make lifestyle changes and engage in healthy behaviors, with the ultimate goal of having a healthy baby
- **Partner**: completing all assigned tasks and/or helping family members complete their tasks
- **Record-keeper**: establishing and maintaining accurate records
- **Supporter**: being accessible to families when they need you
- **Teacher**: helping families identify and develop the skills they need to achieve their goals

To fulfill your role, you must first be able to establish warm, supportive and empowering relationships with families whose culture, beliefs, values, and priorities may not be the same as your own. Your relationship with each family is key to your effectiveness.

— Adapted from Early Head Start Training & Technical Assistance Services, Western Kentucky University
How Can I Be an Effective Home Visitor?

Home visiting is not an easy job. It requires patience, diplomacy, a sense of humor, and the belief that things can change.

**Home Visitor Skills & Knowledge**

- Interpersonal skills that foster trust including sensitivity, empathy, flexibility, accessibility, patience, resourcefulness, enthusiasm, and the ability to be non-judgmental
- Communication skills including effective listening, cultural sensitivity, and good verbal and written skills
- Willingness to support and respect the competence, cultural values, and privacy of the family
- Knowledge of enabling and empowering principles that support and promote self-sufficiency
- Problem solving and solution-seeking skills
- Ability to identify warning signs and help family respond to problems with the pregnancy
- Ability to motivate change
- Knowledge of research-based content related to having a healthy baby
- Knowledge of program philosophy, goals, and objectives
- Ability to translate program goals into practice
- Effective time management, documentation, organizational, and teamwork skills
- Knowledge of and access to community resources
How Do I Build a Trusting Relationship?

During your first few visits with each family, you will explain your role as their home visitor. You will then begin the process of developing a trusting relationship. This happens when you arrive at the time you say you will, do what you say you will do, keep their confidences, respect their culture and values, and listen earnestly without judgement.

*The trusting relationship you build with each family is the key to your effectiveness as a home visitor.*

Who Should Participate in the Visits?

Although some home visiting programs consider the pregnant woman to be their “client,” it is also important to work closely with the partner and other family members, including grandparents. How often you should make an effort to include other family members or significant others depends on the goals of your program, the expectant mother’s preferences, her relationship with other family members, and the likelihood they’ll be available for the visit.

Often the target of discussion is the mother-to-be. Many topics discussed on home visits are intimate and personal. She may not want other family members to be involved in these discussions. Respect her wishes.

Many programs have special outreach to include fathers throughout the pregnancy. However, the mother’s current partner may not be the baby’s father and the mother may have reasons related to violence, abuse, or drugs that make it important for her to stay away from the baby’s father. If safety is not an issue, it is usually a good idea to help her see the advantages of encouraging the father-child relationship. Many times there are other children in the home. The health and development of these children should also be considered paramount.

Even if the mother-to-be is the only member of the family you visit, you still need to ask yourself, “How can I make sure the mother is supported in her efforts?” and “Would it be helpful to include other family members or significant others in this discussion?”
How Do I Conduct a Home Visit?

Every visit requires you to plan what topics will be covered, discuss those topics during the visit, and complete follow-up activities.

**Before the Home Visit:**
- **Review** the record from your previous visit with this family. Gather any information you need and take any actions you promised.
- **Plan** what you will accomplish at the visit, identifying topics to be discussed.
- **Decide** what handouts or other materials you will need to share.
- **Collect** other items you need—props for demonstrating and practicing or toys to occupy siblings.
- **Call** the day before or the morning of the visit to confirm your visit time.

**During the Visit:**
- **Greet** each person present.
- **Ask** to reduce or remove any distractions, e.g., turn off TV, move to a quieter location.
- **Inquire** about any immediate needs or concerns.
- **Report** on what has been accomplished since your last visit.
- **Review** the purpose for the visit with the family.
- **Discuss** topics planned for the visit.
- **Model** desired parenting skills and parent-child interaction.
- **Observe** and make a mental note of any concerns or dangers that require further discussion or action. Urge the expectant mother to discuss any health concerns with her prenatal provider.
- **Summarize** what has been discussed or accomplished at the visit.
- **Propose** topics that might be planned for the next visit and agree about what needs to occur between now and then.
- **Confirm** the date and time of your next visit. Write it in your planner.
- **Close** the visit by saying good-bye to each person present.

**After the Home Visit:**
- **Record** what was accomplished and what happened at the visit using your program’s format for this purpose. A form for recording topics discussed, the Home Visit Record, is on page 1 of the Tools Section (Appendix 3).
- **Note** any referrals to be made or tasks to be completed before the next visit.
- **Note** any issues you need to discuss or report to your supervisor.
- **Reflect** on the visit by asking yourself:
  - Did I attend to what the family was telling me with their words and non verbal cues?
  - Am I sure that important points were understood?
  - Were there any signs of problems that I should look into further?
  - Did I encourage the expectant mother to contact her provider about any health concerns?
  - Did I notice how the other children were behaving?
  - Did I feel confident that the expectant mother and her children are in a safe place?
  - How did our visit further this family’s goals?
  - What else might I do to empower this family?
How Do I Use this Curriculum?

In order to achieve program goals and help families meet their goals, you have to be knowledgeable about a variety of topics that impact expectant families. This curricular series was developed to help you effectively plan and conduct home visits. The curriculum brings together the information you are likely to need so you don’t have to scurry around pulling together resources. Information is provided on topics related to: Family Development, Maternal & Family Health, Preparing for Baby/Caring for Baby, and Baby’s Development.

If you have used other books in the Partners for A Healthy Baby curricular series, you are already familiar with the layout. If not, or if you need a review, the steps to planning your visit using the curricular materials are provided within this user’s guide.

We hope expectant families will be recruited during their first trimester so you can make the greatest impact on their pregnancy. When this is not possible, refer back to the 1st Trimester to ensure you cover important topics. After the 1st Trimester, the sections are organized by month throughout the pregnancy. Each tabbed section includes a list of the purposes for your visits, detailed information regarding each purpose, handouts for you to use with the families, and additional resources.

This information is designed to help you:

- Plan the purpose of your visit so that critical topics are covered in a timely manner.
- Know important facts related to each purpose and where to find additional information and resources when needed.
- Discuss the purpose of your visit and communicate effectively about it by using questions and other prompts that are provided.
- Record and keep track of the topics covered with each family.
- Know what to look for, and when to look for it, in order to help detect any early signs of problems. When a health concern is noted, urge the expectant mother to contact her provider.
- Encourage changes toward healthier lifestyles for expectant families.
- Recognize what should be reported to your supervisor or when to seek further guidance.
- Prepare parents with the knowledge and skills needed to care for their baby and support optimal bonding and attachment.
Purpose Sheets

Each tabbed section begins with an outline that lists the specific “purposes” or tasks for your visits that month. No attempt is made to break purposes into weekly segments—you can do that if you visit weekly. Tailor your choice of purposes to the needs of each family while using the curriculum as a guide to ensure critical topics are covered. Omit only those purposes that you know do not apply to a specific family.

The four curriculum categories: Family Development, Maternal & Family Health, Preparing for Baby/Caring For Baby, Baby’s Development are listed on the right side of the Purpose Sheets. Under each is a list of “Topics” related to that curriculum category. We recommend that you begin with purposes that are of particular concern or interest for the family and address your program goals.

Some programs have developed a planning form for home visitors to use. In Appendix 3: Home Visiting Tools (page 3), we’ve included a sample planning form. Whatever planning tool you use, let it be your guide. Don’t read to the family from it or the curriculum.

Family Development — includes the topics: Empowerment; Relationships & Support; Fatherhood; Career Development & Finances.

Maternal & Family Health — includes the topics: Diet & Nutrition; Exercise & Physical Activity; Alcohol, Drugs, & Tobacco; Sex, STDs, & Family Planning; Family Health Care & Safety; Emotional Health.

Preparing for Baby/Caring For Baby — includes the topics: Nutrition/Feeding; Daily Care Routines; Health & Safety.

Baby’s Development — includes the topics: Fetal Development; Infant Mental Health.
The pages that follow each purpose sheet provide detailed information about how to address each purpose (or task). The information is presented in two different colors.

The words in black print (prompts) are intended to remind you of important points you need to make and help you come up with words and phrases to introduce and discuss them. As needed, reword the text to fit the family’s circumstances, but be sure to convey the basic information that is outlined.

These prompts are for you to study as you plan your visit. You should not take the detailed information sheets with you into a visit because you may be tempted to read them. As you know, reading information or shuffling papers is a sure way to lose the attention of the person you are visiting.

The words in blue offer additional instructions, call your attention to things you need to be aware of or look for, and suggest follow-up actions you may need to take.

Review these detailed information pages before your visit and make brief notes on whatever planning form you use regarding the main points you plan to cover. Talk about the main points in your own words during the visit. If you can’t discuss the material without reading prompts or the handout word-for-word, you need more training and study of the issue before you conduct a visit.

Make your visits interesting by avoiding abstract conversations whenever possible. Most of us learn best by seeing and, better yet, by doing. Show the family what you are talking about by demonstrating it and have them do it too. For example, if the purpose of your visit is to discuss shopping for nutritious foods, go to the grocery store with mom and have fun checking the labels. Make sure you know the parameters your program sets for conducting visits at places in your community rather than in the home and whether you can transport a parent or give vouchers for public transport.

If you are going to make a difference in the lives of the families you visit, it is crucial that you help them see the relevance of these topics to their own lives and circumstances, to the issues they face every day, and to the goals they set for themselves and their children. No curriculum can help them make this connection—but YOU can.
Handouts for Families

The purpose of the handouts is to help families:

- Learn how to have a healthy pregnancy.
- Make changes toward healthier lifestyles.
- Think about their life goals and dreams and how to reach them.
- Recognize early warning signs of pregnancy-related health problems.
- Be physically, emotionally, and financially prepared to have a baby.
- Learn ways to support their unborn baby’s growth and development.
- Manage the stress that pregnancy and a new baby can bring.
- Improve their self-esteem.

The handouts summarize critical points on each topic and in some cases help visitors discuss issues that may otherwise be awkward to broach. Visitors should study handouts and home visitor instructions on the detailed information page carefully prior to visits so they can talk in their own words, rather than reading word-for-word. Focus groups were conducted with families to determine in which format the information would be most appealing. We learned that families wanted colorful, magazine-style pages they could personalize and keep.

We recommend that:

- Programs purchase a set of handouts for each family.
- Home visitors offer each handout to the family at an appropriate time and review it with them, allowing the family to keep it for future reference.
- Families have a three-ring notebook for their handouts. They may want to add family photographs and create additional scrapbook pages for baby’s keepsakes.

Miniatures of the handouts are shown on the right side of the detailed information page and a full-size version of each handout is provided in numerical order in Appendix 1: Handouts for Families. In this Third Edition of Before Baby Arrives, whenever a Handout is referenced on the Detailed Information Page, both the current and previous Handout numbers are listed. Please note that these handouts are protected by copyright and may not be reproduced.

Resources

Resources cited at the bottom of each detailed information page provide additional information related to the purpose of the visit. The icons shown below identify the type of resource. An “*” to the left of an icon indicates the item is also available in Spanish.

- Partners Handout
- Hotline/Helpline Number
- Pamphlet
- Website
- Book
- Idea
- Video

Information for finding or ordering resources is organized by resource type and can be found in Appendix 2: Resources. Each program should also have a list of local resources and contact information specific to their community.
Home Visit Record

You will be visiting numerous families concurrently and customizing the topics you discuss with them according to the month of their pregnancy and their specific circumstances. You will need to have a way to keep track of the topics you cover with each family. The Home Visit Record will help you do this.

Each time you conduct a visit, record the topics you discussed on a copy of the Home Visit Record. The purpose sheet, and the detailed information pages that follow, indicate which topic to record. You will need to record all topics you covered during your visit—the topics you planned to cover as well as additional topics discussed spontaneously in response to the family’s interests.

The Home Visit Record is not intended to replace your narrative progress notes or other detailed records that are part of your program’s documentation system. Such notes and observations about the visit still need to be recorded on the form(s) approved by your program.

Periodically, the topics you record on the Home Visit Record should be summarized in order to produce a cumulative record of topics covered for each family. When tracked and analyzed, this data can link program effort to family and program outcomes.

See Appendix 3: Home Visiting Tools for full-size, reproducible copies of this form in both black and white and full-color.
Home Visitor Training & Supervision

This curriculum is not a substitute for home visitor training. It is designed to be as comprehensive as possible, while remaining manageable for daily use. Some details and background information have been omitted for the sake of brevity and clarity. It is important, therefore, that visitors using this curriculum receive extensive pre-service and ongoing training on the broad range of content topics, as well as on home visiting practices. Training should clarify any programmatic and legal limitations on the visitor's role.

Effective use of this curriculum requires ongoing supervision and professional guidance. The recommended visitor-supervisor ratio is no more than 6:1, with a lower ratio for visitors whose work sites are geographically dispersed. Reflective supervision is critical because of the isolated nature of home visiting and the challenges of working with families with complex needs. Regular opportunities for reflection provide support for the home visitors and help them develop problem-solving skills. Home visitors should also receive professional guidance from a multidisciplinary team having expertise in the fields of nursing/medicine, social work, nutrition, mental health, and early childhood development.

Training on the Partners for a Healthy Baby curriculum is available from the FSU Center for Prevention & Early Intervention Policy.

The interactive training will help home visitors use the Partners curriculum to:
- plan effective home visits
- promote healthy birth outcomes
- model parenting skills that support optimal bonding, attachment, & responsive caregiving
- teach parents ways to facilitate their child's development
- detect early signs of health or developmental problems
- more easily address topics that may be difficult to discuss

Learn how to support your families and achieve program goals using the research-based, practice-informed Partners for a Healthy Baby curriculum.

For more information, visit our website:
www.cpeip.fsu.edu or call 850-922-1300.
Keys to Using the Curriculum for Effective Home Visits

🌟 Foster relationships. Your relationship with the family is an essential component of effective home visits. Spend time building and nurturing this relationship. This curriculum will be less effective without it.

🌟 Empower the family. Find every opportunity to acknowledge the family’s progress in achieving their personal goals. You may not be the expert—but you can be their coach, teacher and mentor.

🌟 Prepare. Plan your visits. Review the purposes before you visit. Choose those that are most appropriate. Study the related detailed information pages. Read the handouts ahead of time. Practice using them so you can talk about the information in your own words.

🌟 Address the family’s concerns first. Effective home visitors balance family concerns with program goals. Families will be more engaged if you first help them with what they need and then introduce the information from the curriculum in the context of their situation.

🌟 Be observant. Notice non-verbal cues as well as what the family is saying. Observe the relationships in the home. Pay attention to your intuition when you feel something’s not right and act accordingly.

🌟 Make learning fun. We all learn best by doing. If you’re teaching how to breastfeed, bring a doll and let the expectant mom practice using it. If you’re talking about nutrition, use real food labels to learn about nutritional content.

🌟 Ask when you don’t know. You don’t have to know all the answers, but you need to know how to find them. Ask your supervisor, nurse, mental health consultant, child development specialist, or disability coordinator when you need advice, consultation, or support.

🌟 Take advantage of training and resources. Seek opportunities for new knowledge. The more you know, the better you can help your families. If you are unfamiliar with a subject or want more information, look up the websites, books, videos, or pamphlets listed in the resource section.

🌟 Practice, practice, practice. The more times you cover the topics in this curriculum, the better prepared you will be. Practice in front of the mirror. Don’t be afraid to ask your peers or your supervisor to practice with you. You will be better able to effectively use and deliver the information with practice.

🌟 Nurture yourself. Nurturing yourself nourishes your body, mind, and soul. You will find you have more to give the families you serve if you also take care of yourself.